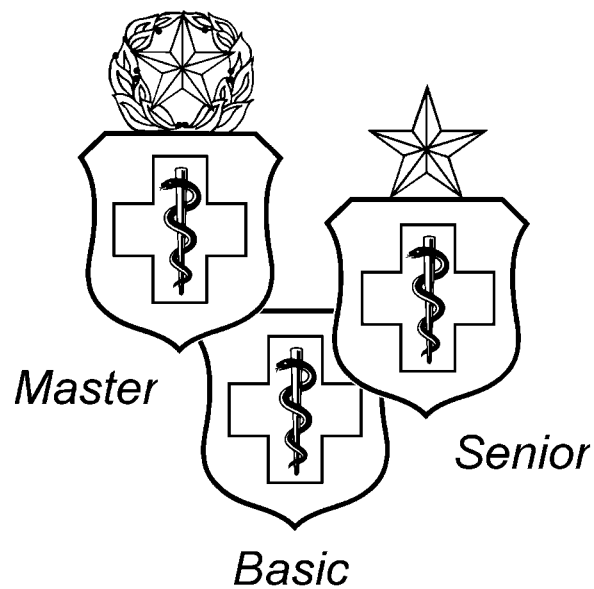


Diet Therapy

Develop a Management Plan (Index)



AFSC 4D071

382d Training Squadron
Training Management
917 Missile Road, Ste 3
Sheppard AFB TX 76311-2263

INTRODUCTION

1. This qualification training package (QTP) was developed to make available a training aid that will assist Diet Therapy Technicians in developing technical skills essential to performing specialized tasks. The tasks are broken down into teachable steps, which help the trainer guide the trainee into becoming proficient with the tasks. The QTP will also aid the task certifier when evaluating trainees for task certification.
2. As a trainer, direct the trainee to review the training references to better understand the objective of this QTP. Go through the steps in the task performance (checklist) with the trainee and allow for enough time to learn each step; some steps may take more time than others. Remember that the purpose of this QTP is to ensure the trainee can perform each task thoroughly. When the trainee receives enough training and is ready to be evaluated on the objective, follow the evaluation instructions. Conduct a feedback with the trainee on this QTP. After you have ensured and documented that the trainee is qualified to perform the task, the trainee should be evaluated by a certifier.
3. The goal of the developers of this QTP is to publish a useful document for trainers and trainees that will meet Air Force needs under the concepts outlined in the Career Field Education and Training Plan (CFETP). We value your expertise in meeting this goal. If you find discrepancies in this QTP, or have suggestions for its improvement, or if you have suggestions for other areas that may benefit from a QTP, please let us know about them.

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For convenience, we have also attached a Feedback/Improvements/Corrections letter to this QTP.

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<i>SUBJECT AREA:</i>	Management Plan for Nutritional Medicine. (NM)*
<i>TASK(s): Names</i>	Mission Statements, Organizational Charts, NM Departmental Task Analysis (DTA), Medical Group (MDG) Strategic Plan, Master Plan, Annual Inservice Training Plans, Goals and Objectives, Process Improvement Initiatives (Optional-This may be included in other section binders, i.e., Performance Improvement/Quality Assurance Plan), NM Operating Instructions, Manpower, Financial Status, Appointment Letters.
<i>CFETP/STS REFERENCE(s):</i>	23.5
<i>TRAINING REFERENCE(s):</i>	Training reference areas for locating information for the task names listed above can be found in () beside the specific item on the attached Performance Checklist.
<i>EQUIPMENT REQUIRED:</i>	None
<i>OBJECTIVE:</i>	The trainee will successfully develop a Management Plan Index (MPI) designed for quick reference. Information included in the section's management plan should provide decision-makers with the data needed to plan, direct and implement section activities. Additionally, collection of this data into one guidebook will facilitate the inspection process.
<i>EVALUATION:</i>	After the trainee has completed the MPI, evaluate the individual's organizational skills and whether the items they have included in the index reflect an understanding of their facility's specific requirements.
<i>REMARKS/NOTES:</i>	Steps identified are related to each task subject. Task names listed above are not in any mandatory order and are neither all-inclusive nor exclusive to any facility.

*Nutritional Medicine (NM) could refer to an Element, Flight or Squadron

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EVALUATION INSTRUCTIONS:

1. This QTP should be evaluated during actual performance of the tasks or as an end product evaluation. (Whichever applies.)
2. After the trainee has received instructions, allow sufficient practice on each part of the task. The trainee must satisfactorily perform all parts of the task.
3. Use the appropriate checklist when evaluating the task to ensure all steps of the task are accomplished. ***NOTE: The extent to which the trainee actually produces, develops and assembles the Management Plan material is at your discretion. The intent of this QTP is that the trainee be able to locate, identify and organize required documentation, not to recreate what you already have. If the documents will be useful to you have the trainee provide or update the documents as necessary at your facility.*** If the trainee successfully accomplishes the objective, document appropriately in the individual's training record. If the trainee does not accomplish the objective, review the areas needing more training until the objective is met.
4. Document competency upon satisfactory completion of the evaluation. Initial evaluation should be documented in the Specialty Training Standard (STS) of the trainee's CFETP. All recurring evaluation should be documented using AF Form 1098, *Special Task Certification and Recurring Training*, or using an approved substitute record.

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PERFORMANCE CHECKLIST

ITEM	SAT	UNSAT	N/A
1. Does the MPI mission statement section include			
a. Command Mission Statement (SG/SGA)			
b. Base Mission Statement (SG/SGA/Base CC)			
c. MDG Mission Statement (SG/SGA)			
d. The USAF Dietetics Vision (Chief Consultant to AF Surgeon General for Nutrition and Dietetics; Travis AFB)			
e. Base Organizational Chart (SG/SGA or Base CC)			
f. MDG Organizational Chart (SG/SGA)			
g. NM Organizational Chart (NM)			
2. Does the MPI NM DTA section contain: (If DTA has been accomplished it may be located in departmental Quality Improvement Binder. If DTA not accomplished - contact Quality Service Office for more information.)			
a. Philosophy			
b. Mission Statement			
c. Scope of Care/Services			
d. Key Customers (internal/external)			
e. Key Suppliers			
f. Key Processes			
3. Does the MPI medical facility strategic plan section include:			
a. Air Force Medical Service Strategic Plan (SG/SGA-pamphlet <i>Air Force Medical Service Strategic Plan</i>)			
b. MDG Strategic Plan			
4. Does the MPI master plan section include annual, semiannual, quarterly and monthly tasking for the: (NM- may be maintained by Quality Assurance Monitor)			
a. Director			
b. Dietitians			
c. Manager			
d. Superintendent			
e. NCOIC			
f. Supervisors			
5. Does the MPI master plan section include: (NM OIC/NCOIC)			
a. In-service topics and dates for the year			
(1) All Personnel			
(2) Patient Tray Personnel			
(3) Disaster Team Training			
(4) Leadership Training			
b. Performance Reports and Feedback Scheduling			
c. Equipment Replacement Plan			
d. NM Budget			
e. Roster of meetings requiring NM personnel attendance			

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f. Personnel Rotation Schedule for NM duties			
6. Are NM goals and objectives (NM OIC/NCOIC)			
a. Clearly listed with ECD and OPR designation			
b. Updated Quarterly			
7. Does the MPI include a section for MDG NM instructions (NM OIC/NCOIC)			
8. Does the MPI manpower information section contain: (NM OIC/NCOIC/RMO)			
a. Current UMD			
b. All known gains and losses of personnel			
c. Current manpower equations			
d. Additional readiness tasking			
9. Does the MPI monetary status information section include: (NM or Resource Management Office)			
a. Comparison of previous years monetary status			
b. AF Form 541 for the past four quarters			
10. Do the MPI appointment letters section include: (NM or externally generated)			
a. Mission Essential Personnel			
b. Access authorization for limited access locations (storeroom)			
c. Patient Assistance Team Members			
d. Cash Fund Custodians			
e. Resource Advisors			
f. TASO			
g. Safety/Security/Infection Control-- monitors			
h. Property Custodian			
i. Outside Organization tasking			
11. Do the MPI management indicators section include graphs and accumulated data for: (OIC/NCOIC)			
a. Meals Served			
b. Outpatient Visits			
c. Inpatient Surveys			
d. Outpatient Surveys			
e. Dining Patron Surveys			
f. Earnings Less Issues			
g. End of the Month Inventory			
12. Does the MPI include facility specific requirements? (SG/SGA/NM)			

FEEDBACK: Using this checklist as a source of information, discuss the trainee's performance indicating strengths, weaknesses, suggested improvements, etc.

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INFORMATION FOR TRAINEE:

Review the checklist on developing a management plan and any references indicated, with your trainer. Be sure you completely understand each step/task on the checklist.

Your trainer will use the checklist when evaluating this QTP. If you have any questions ASK your trainer.

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IMPROVEMENTS / CORRECTIONS LETTER

From: _____
(Rank, Last Name, First Name, Middle Initial) _____
(Date)

(Official Address, DSN)

***QTP Number and
Title*** _____

List any improvements, corrections, or comments you have about the QTP. Please be specific as to the page, reference, and module.

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Attention: Diet Therapy Training Materials Manager